

Minneapolis Department of Health and Family Support

Research Brief • November 2003

Health and well-being of gay and bisexual men in Minneapolis

Lesbians, gays, and bisexuals constitute a vital and visible social and cultural community within Minneapolis. The number of lesbians, gays, and bisexuals living in the city is difficult to track, however. Many individuals are reluctant to reveal their sexual identity because of the intolerance they face, and many surveys avoid asking questions about sexual identity because of its sensitivity.

A recent local survey (The Survey of the Health of Adults, the Population, and the Environment -- SHAPE 2002), which inquired about sexual identity, indicates that seven percent of Minneapolis adults – one of 13 residents – identified themselves as lesbian, gay, or bisexual. According to the 2000 U.S. Census, Minneapolis ranks fifth among large cities in terms of the proportion of lesbian- and gay-partnered households.

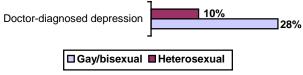
Previous research has indicated that gay and bisexual men have different health needs than other men, and different experiences with the health care system. This Research Brief focuses on the health and well-being of gay and bisexual men between the ages of 25 and 64 in Minneapolis. Data are from SHAPE 1998 and SHAPE 2002, two population-based telephone surveys of adults in Minneapolis and suburban Hennepin County.

Health status and health care utilization

A very high proportion of adult men in Minneapolis, about nine out of ten, report being in good health. Ninety-two percent (92%) of gay and bisexual men report excellent, very good, or good health, compared with 89 percent of heterosexual men. Rates of health insurance between the two groups were similar, with over five of six men being currently insured.

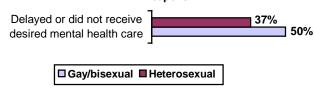
Twenty-eight percent (28%) of gay and bisexual men reported having been diagnosed with depression, which was nearly three times higher than the 10 percent reported by heterosexual men.

Health status among men aged 25-64 years in Minneapolis



Despite the similarity in insurance coverage between the groups of men, a higher percentage of gay and bisexual men who needed mental health services delayed or did not receive care.

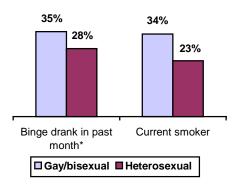
Health care use among men aged 25-64 years in Minneapolis



Health risk behavior

More than one-third of gay and bisexual men reported cigarette smoking and one-third reported binge drinking. Binge drinking is defined as drinking five or more drinks on one occasion. The rates of these behaviors were lower among heterosexual men.

Health behaviors among men 25-64 in Minneapolis



^{*} Drank five or more drinks on one occasion

Sexual health is an important aspect of overall health, and is usually addressed in most surveys of gay and bisexual men. However, given the sensitive nature of this line of questioning, and the age range and cultural diversity of adults surveyed, the SHAPE survey did not inquire about sexual activity or sexual health.

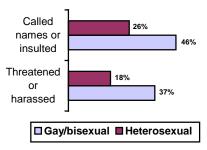
Social factors

Most gay and bisexual men are active in their neighborhood or community. Over half (58%) of the gay and bisexual men were involved in a school, community, or neighborhood activity at least several times per year, and two-thirds (66%) felt they could have a moderate to large impact in making their community a better place to live. These percentages were similar to those found among male heterosexuals.

Unfortunately, one out of five gay and bisexual men reported discrimination due to their sexual identity. Most often this occurred on the job, or while trying to get a job.

Data from the SHAPE 1998 survey indicate that a much higher percentage of gay and bisexual men experienced incidents of receiving threats or insults compared with heterosexual men.

Acts of discrimination reported by men aged 25-64 years in Minneapolis



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The data for this document was based on information from the 1998 and 2002 Survey of the Health of Adults, the Population, and the Environment (SHAPE), a collaborative effort of the Minneapolis Department of Health and Family Support, the Blooming Division of Public Health, and the Hennepin County Community Health Department.

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Implications and recommendations

Gay, bisexual, and heterosexual men share many common life experiences. This analysis shows both groups have similar participation in neighborhood and community activities.

 The formal and informal communities of gay and bisexual men should be used as a way to disseminate to, and educate these communities.

Gay and bisexual men are at increased risk for certain health conditions and behaviors compared with heterosexual men. A higher percentage of gay and bisexual men experience depression, smoke cigarettes, and/or drink alcohol.

- Health care providers need to increase the screening for depression among gay and bisexual men. Appropriate treatment options should be assured.
- Public health professionals need to customize current drinking moderation and smoking cessation efforts to the gay and bisexual community. Efforts should target community events and formal and informal networks in this community.
- Community agencies and members of the gay and bisexual community need to advocate for increased screening efforts for depression.

Men in general are less likely than women to seek health care when needed. Gay and bisexual men are even less likely than heterosexual men to obtain the care they want. Many reasons may play into this scenario. Some gay or bisexual men do not find the current services available to them welcoming. They may also feel a strong societal pressure to not seek help. Prior to 1973, homosexuality was considered a psychological disorder by the American Psychiatric Association. Judgmental attitudes may persist today. As a result, many gay and bisexual men have a distrust of the medical and mental health community.

- Health care providers need increased training and practice in talking about sexuality and homosexuality with their clients.
- Community agencies and members of the gay community need to encourage men to seek health care when needed.

Over the years, gay and bisexual men have seen gains in their legal rights. However, they continue to experience discrimination or intimidation due to their sexual identity.

 Police, community agencies, and members of the gay community need to increase the awareness, reporting, and resolution of hate crimes committed toward gay and bisexual men.